



TENNESSEE DEPARTMENT OF REVENUE
COMPRESSED NATURAL GAS TAX RETURN

PET
366

Filing Period Beginning: Ending: Due Date	Account No. Location Address	SSN or FEIN If this is an AMENDED RETURN, } <input type="checkbox"/> please check the box at right
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Returns must be postmarked by the due date to avoid the assessment of penalty and interest. Returns must be filed even if no tax is due.

Make your check payable to the Tennessee Department of Revenue for the amount shown on Line 8 and mail to:

Tennessee Department of Revenue
Andrew Jackson State Office Bldg.
500 Deaderick Street
Nashville, TN 37242

For assistance, you may call in-state toll free 1-800-342-1003 or (615) 253-0600.

REMINDERS

1. Read line instructions carefully when completing this return.
2. Complete all information and schedules.
3. Transfer totals from schedules to appropriate lines.
4. Sign and date your return in the signature box.

TAX COMPUTATION

A gallon equivalent factor of 5.66 pounds per gallon shall be used when completing this return.

1. Gallons of fuel received during the month	_____
2. Gallons of fuel delivered into licensed vehicles from nontaxable source. (Schedule "A")	_____
3. Gallons of fuel used for all purposes other than in a licensed vehicle. (Schedule "B")	_____
4. Total Tax Due - Multiply Line 2 by ¢	_____
5. Enter outstanding credit amount from previous Department of Revenue notice(s)	_____
6. Penalty { If filed LATE, compute penalty at 5% of the tax (Line 10 minus Line 11) for each 1 to 30 DAY PERIOD or portion thereof for which TAX is DELINQUENT (Total penalty NOT TO EXCEED 25%.) Minimum penalty is \$15 regardless of the amount of tax due or whether there is any tax due.	_____
7. Interest (Line 4 minus Line 5 multiplied by % per annum on taxes unpaid by the due date)	_____
8. TOTAL REMITTANCE AMOUNT (Total of lines 4, 6, and 7; subtract Line 5 if applicable)	_____

FOR OFFICE
USE ONLY

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Under penalties of perjury, I declare that I have examined this claim, and to the best of my knowledge and belief, it is true, correct, and complete.

Taxpayer's Signature _____	Date _____	Title _____
Tax Preparer Signature _____	Date _____	Telephone _____
Preparer's Address _____	City _____	State _____ ZIP _____

For additional information, contact the Taxpayer Services Division in one of our Department of Revenue Offices:					
Chattanooga	Jackson	Johnson City	Knoxville	Memphis	Nashville
(423) 634-6266	(731) 423-5747	(423) 854-5321	(865) 594-6100	(901) 213-1400	(615) 253-0600
Suite 350	Room 405 B	204 High Point Drive	Room 606	3150 Appling Road	3rd Floor
State Office Building	Lowell Thomas Building		State Office Building	Bartlett, TN	Andrew Jackson Building
540 McCallie Avenue	225 Martin Luther King Blvd.		531 Henley Street		500 Deaderick Street
Tennessee residents can also call our statewide toll free number at 1-800-342-1003.					
Out-of-state callers must dial (615) 253-0600.					

COMPRESSED NATURAL GAS PUT INTO TANK OF VEHICLE(S) LICENSED TO USE PUBLIC HIGHWAYS

[illegible]

SCHEDULE B
COMPRESSED NATURAL GAS USED FOR PURPOSES OTHER THAN IN A LICENSED VEHICLE

(Transfer to Line 3 on front of the return)

